With Initial

Filing

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Group Art Unit

Examiner Name

DEG! 4D4710N FOD HTW ITV OD		Attorney Docket Number	46884.00019	
DECLARA	TION FOR UTILITY OR DESIGN	First Named Inventor	Jerome J. Scheuring	
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN		
		Application Number	1	
☑Declaration Submitted	Declaration OR Submitted after Initial	Filing Date		

Filing (surcharge

(37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:						
My residence, post office address, and citizenship are as stated below next to my name.						
I believe I am the original and	first inventor of the subject matte	er which is claimed and for which	h a patent is sought	on the invention	entitled:	
Calendaring Syste	ems and Methods					
					.	
the specification of which (Title of the Invention)						
is attached hereto						
OR						
U was filed on (MM/טט	□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International					
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part						
applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority the	benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any fo	oreign application(s) for patent, in	ventor's or plant	
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant						
breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application	Country	Foreign Filing Date	Priority	Certified C	opy Attached?	
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO	
•						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numbor Bar Code Labor		30256		OR	Correspondence address below	
Name						
Address						
City	State			ZI	P	
Country		Teleph	one		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:	A petiti	ion has	been f	iled for th	is unsigned inventor	
Given Name Jerome J. Family Name Scheuring or Surname						
Inventor's Signature				Date		
Carmel	CA		USA		USA	
Residence: City	State		Country		Citizenship	
PMB 251; 225 Crossroads Blvd Mailing Address						
Carmel	CA 9392		93923		USA	
City	State	e Zip			Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
			Family Name Scheuring or Surname			
Inventor's Signature				Date		
Carmel	CA		USA		USA	
Residence: City State			Country		Citizenship	
PMB 251; 225 Crossroads Blvd						
Mailing Address						
Carmel	CA		93923		USA	
City	State		Zip		Country	
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						



Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname			
Darlene			Waddington .			
Inventor's Signature					Date	
Residence: City La Crescenta	CA State	USA			USA Citizenship	
Mailing Address 4809 Janvier Way						
Mailing Address						
City La Crescenta	CA State	ZIP	ZIP 91214 USA Country		USA untry	
Name of Additional Joint Inventor, if any:					this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname			
Inventor's Signature					Date ·	
Residence: City	State Country			Citizenship		
Mailing Address					•	
Mailing Address						
City	State	Zip Cou		Со	ountry	
Name of Additional Joint Inventor, if any:			☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname			
Inventor's Signature Date						
esidence: City State Country		Citizenship				
Mailing Address						
Mailing Address						
City State			Zip	C	ountry	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.